

Expomin Trade Show Application April 9-13, 2012

To assist us in better understanding your objectives for this mission, we ask that you complete this questionnaire with as much detail as possible.

PLEASE COMPLETE THIS FORM IN MICROSOFT WORD AND E-MAIL TO:

ANEUENSCHWANDER@UTAH.GOV

NO LATER THAN CLOSE OF BUSINESS ON FEBRUARY 28, 2012. PLEASE RETURN SOONER IF POSSIBLE.

QUESTIONS: Contact Miguel Rovira, Governor's Office of Economic Development, 801 538-8885, MROVIRA@UTAH.GOV

ANY INFORMATION PROVIDED ON THIS FORM WILL BE HANDLED AS CONFIDENTIAL.

SECTION A: Information About Your Company & Product/Service						
Company Name:						
Address:						
	City	State Zip				
Web Site:						
Contact Person:						
Title:						
Phone:		Fax				
E-mail:						
Type of Business: (select all that apply)						
Manufacturer		Export Management Company				
Distributor/Re	epresentative	Trade Association				
Service Comp	any/Organization	Education Organization				
Franchiser		Other (Specify)				
Year Established: # of Employees (est)						
Annual Sales:	Less than \$5 Million	\$5-10 Million More than \$10 Million				
Annual Exports (as % of Total Sales): Not exporting Less than 25% More than 25%						

Briefly describe the products or services of your company/organization:					
Does your company currently export to Chile? If so, please give a brief explanation and current selling volume.					
SECTION B: Trade Show Objectives					
Please identify your objective(s) for participating in this trade show (select all that apply). Then complete the					
applicable sections of this questionnaire as instructed.					
Acquire market information on business opportunities in Chile.					
Obtain practical information on how to conduct business in Chile.					
Obtain contacts and/or network with appropriate Chilean business leaders. COMPLETE SECTION C					
Obtain contacts and/or network with appropriate Chilean government leaders. COMPLETE SECTION C					
Find a partner/agent to represent my product/service in Chile. COMPLETE SECTION E					
Raise my company's profile with existing clients or partners in Chile by participating in a state delegation.					
Please list additional objectives you have for the Trade Show:					
SECTION C: Identify Contacts					
If you indicated in Section B that one of your objectives for participating in the trade show is to obtain contacts and/or to					
network with appropriate Chilean business or government leaders, please provide any guidance you might have on what type					
of business/government leaders you wish to meet. Also, if you have specific people you wish to meet, please provide their name and contact information so we can consider inviting them to an appropriate event.					
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SECTION E: Finding a Local Partner

If you indicated in Section B that one of your objectives for participating in the trade show is to identify a local partner or agent to represent you in Chile, please complete this section of the questionnaire with as much detail as possible.						
Is your company currently represented in Chile? YES NO						
If YES, is this arrangement exclusive? YES NO						
If applicable, please provide the necessary contact information for your current representative/partner in Chile: Company Name:						
Address						
Contact Person: Title:						
Contact Phone: Fax:						
Contact E-mail:						
Is your representative/partner aware you are seeking additional representation? YES NO						
What type of business contacts are you seeking? (Select all that apply)						
Distributor/Wholesaler Joint Venture Partner or Licensee						
Agent/Sales Representative Other (Specify)						
Franchisee None (not seeking a representative/partner)						
Is your firm seeking representation on an exclusive basis in this market? YES NO Who are you major competitors at home and abroad?						
The die you major compension at nome and across						
List the most important end-users or end-user industries for your product/service.						

How is your product typically distributed and marketed in the U.S. and in other countries, if applicable?						
Flow is your product typically distributed and marketed in the 0.5. and in other countries, it applicable:						
What type of licensing or registration does your product require in the U.S.? (i.e., FDA Approval)						
what type of needshig of registration does your product require in the 0.5.: (i.e., 1511/15p) ovar)						
What related products might an agent/distributor of this product also handle?						
what related products hight an agent/distributor of this product also handle:						
Does your company produce the product or have rights to export the product/service? YES NO						
US Codo (antiqual):						
HS Code (optional):						
Export Control Classification Code (optional):						
Describe any preferences, technical qualifications, servicing capabilities, requirements, or pre-qualifications that ideal						
prospects must have, such as language ability, size, revenue, coverage, client base, investment, etc.						
Describe any special features of your company's operations, interests, or objectives in Chile that can help us identify						
potential business partners.						
potential basiness paralels						
Are there any specific companies, or types of companies, you would like us to contact? If so, please name them.						

Are there any specific companies, or types of companies, you would NOT like us to contact? If so, please name them.

Does your product contain at least 51% U.S. content? YES NO							
The number of invitees is limited, what individual(s) would likely represent your company? Please provide name, title and contact information below. <u>Two (2) individuals maximum.</u>							
Participant Name:			Title:				
Phone Number:			Email:				
Participant Name:			Title:				
Phone Number:			Email:				

E-mail this completed form to
Aaron Neuenschwander
Governor's Office of Economic Development
ANEUENSCHWANDER@UTAH.GOV

Return by close of business on February 28, 2012 (or sooner if possible)